UNITED STATES BANKRUPTCY COURT
MIDDLE DISTRICT OF FLORIDA
FORT MYERS DIVISION

In re:

ALLIED PORTABLES, LLC,

Case No. 9:17-bk-00865-FMD
Chapter 11

Debtor.
______________________________/

STATEMENT UNDER § 1116 (1)(A)

Pursuant to 11 U.S.C. § 1116(1)(A), the Debtor, Allied Portables, LLC, by and through its Chief Restructuring Officer, Gerard A. McHale, Jr., hereby states the following:

1. As to the Debtor's business operations, the following documents are attached:

    (a) 9/30/2016 balance sheet; and
    (b) 9/30/2016 statement of income.[1]

2. As to the Debtor's Federal tax return, the Debtor's 2015 tax return is attached.

I, Gerard A. McHale, Jr., as Chief Restructuring Officer of Allied Portables, LLC, declare under penalty of perjury that except for the items attached hereto, there are no other documents that comply with 11 U.S.C. Section 1116 and that same is true and correct to the best of my information, knowledge and belief.

February 8, 2017.

Allied Portables, LLC

/s/ Gerard A. McHale, Jr.
By: Gerard A. McHale, Jr., CRO

[1] The attached statements are unaudited and subject to the CRO's review and adjustment.

ALLIED PORTABLES, LLC
ACCRUAL BASIS

Balance Sheet
SEPTEMBER 30, 2016

ASSETS		
Current Assets:		
Cash in Bank	$ 165,388	
Accounts Receivable	516,325	
Loans Receivable	3,234	
Total Current Assets		$ 684,947
Fixed Assets:		
Machinery and Equipment	$ 1,445,073	
Autos and Trucks	1,052,801	
Office Equipment	24,540	
Buildings	10,523	
Signs	3,805	
Accum. Depreciation	-1,312,641	
Total Fixed Assets		1,224,101
Other Assets:		
Goodwill	$ 2,750	
Accum.Amortization	-138	
Security Deposits	1,442	
Account Due From Other	33,917	
Total Other Assets		37,971
TOTAL ASSETS		$ 1,947,019
LIABILITIES		
Current Liabilities:		
Accounts Payable	$ 178,294	
Sales Tax Payable	20,971	
Total Current Liabilities		$ 199,265
Long-Term Liabilities:		
Note Payable Equipment	$ 195,029	
Due to Chester Adamson	1,298,959	
Total Long-Term Liabilities		1,493,988
TOTAL LIABILITIES		1,693,253
EQUITY		
Capital	$ 109,682	
Profit for Period	213,808	
YTD Increase (Decrease)	-69,724	
Total Equity		253,766
TOTAL LIABILITIES AND EQUITY		$ 1,947,019

COMPILED FROM CLIENT'S BOOKS & RECORDS
DAVE GOLDBERG, SR.PARTNER
TAXES & PAYROLL ACCOUNTANTS INC
10231 METRO PARKWAY #205 FORT MYERS, FL 33966

ALLIED PORTABLES , LLC
ACCRUAL BASIS

STATEMENT OF INCOME
Period: PROFIT & LOSS STATEMENT 9 MONTHS ENDED SEPTEMBER 30.2016

Income:		
Gross Sales	$ 2,736,778	
Gross Income		$ 2,736,778
Cost of Goods Sold:		
Field Supplies & Repairs	190,790	
Dumping Expense	64,555	
Casual Labor	5,343	
Portable Restroom Rental Exp	8,765	
Cost of Goods Sold		269,453
Gross Profit		2,467,325
Operating Expenses:		
Accounting	23,974	
Advertising	6,552	
Amortization	137	
Auto and Truck Expense	433,259	
Bank Charges	5,702	
Contributions	330	
Depreciation/Section 179	149,193	
Dues and Subscriptions	4,324	
Entertainment	4,565	
Insurance	199,118	
Interest	21,596	
Legal and Professional	123,605	
Licenses and Permits	3,078	
Office Expense	15,851	
Outside Services	13,775	
Postage	3,651	
Printing	248	
Rent	42,932	
Repairs	81,044	
Supplies	11,466	
Taxes-Payroll	50,997	
Taxes-Other	16,798	
Telephone	23,924	
Travel	2,821	
Uniforms	4,064	
Utilities	6,141	
Software Support	12,240	
Website Fees	2,301	
Gross Payroll	979,118	
Guaranteed Payment	4,000	
Credit Card Fees	507	
Computer Maintenance	6,206	
Total Operating Expenses		2,253,517

COMPILED FROM CLIENT'S BOOKS & RECORDS
DAVE GOLDBERG. SR.PARTNER
TAXES & PAYROLL ACCOUNTANTS INC
10231 METRO PARKWAY #205 FORT MYERS. FL 33966

ALLIED PORTABLES , LLC
ACCRUAL BASIS

STATEMENT OF INCOME
Period: PROFIT & LOSS STATEMENT 9 MONTHS ENDED SEPTEMBER 30.2016

Net Operating Income (Loss)	$ 213,808
NET INCOME (LOSS)	$ 213,808

COMPILED FROM CLIENT'S BOOKS & RECORDS
DAVE GOLDBERG. SR.PARTNER
TAXES & PAYROLL ACCOUNTANTS INC
10231 METRO PARKWAY #205 FORT MYERS. FL 33966

Form **1065**

Department of the Treasury
Internal Revenue Service

U.S. Return of Partnership Income

For calendar year 2015, or tax year beginning ____________, 2015, ending ____________, 20 ____ .

► **Information about Form 1065 and its separate instructions is at *www.irs.gov/form1065*.**

OMB No. 1545-0123

2015

A Principal business activity: SALES	Name of partnership: ALLIED PORTABLES LLC	D Employer identification no.: 26-4556128
B Principal product or service: PORTABLE TOILETS	Type or Print — Number, street, and room or suite number. If a P.O. box, see the instructions.: P.O.BOX 61809	E Date business started: 04/01/09
C Business code number: 532400	City or town, state or province, country, and ZIP or foreign postal code: FORT MYERS FL 33906	F Total assets (see the instrs): $ 1,384,684.

G Check applicable boxes: (1) ☐ Initial return (2) ☐ Final return (3) ☐ Name change (4) ☐ Address change (5) ☐ Amended return
(6) ☐ Technical termination — also check (1) or (2)

H Check accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify) ►

I Number of Schedules K-1. Attach one for each person who was a partner at any time during the tax year ► 2

J Check if Schedules C and M-3 are attached ☐

Caution. *Include **only** trade or business income and expenses on lines 1a through 22 below. See the instructions for more information.*

Section	Line	Description	Sub-line	Sub-amount	Line	Amount
INCOME	1 a	Gross receipts or sales	1 a	3,645,200.		
	b	Returns and allowances	1 b			
	c	Balance. Subtract line 1b from line 1a			1 c	3,645,200.
	2	Cost of goods sold (attach Form 1125-A)			2	387,300.
	3	Gross profit. Subtract line 2 from line 1c			3	3,257,900.
	4	Ordinary income (loss) from other partnerships, estates, and trusts (attach statement)			4	
	5	Net farm profit (loss) (attach Schedule F (Form 1040))			5	
	6	Net gain (loss) from Form 4797, Part II, line 17 (attach Form 4797)			6	
	7	Other income (loss) (attach statement)			7	
	8	**Total income (loss).** Combine lines 3 through 7			8	3,257,900.
DEDUCTIONS (SEE INSTRS FOR LIMITATIONS)	9	Salaries and wages (other than to partners) (less employment credits)			9	1,278,784.
	10	Guaranteed payments to partners			10	4,000.
	11	Repairs and maintenance			11	71,209.
	12	Bad debts			12	
	13	Rent			13	87,996.
	14	Taxes and licenses			14	164,071.
	15	Interest			15	27,455.
	16 a	Depreciation (if required, attach Form 4562)	16 a	198,921.		
	b	Less depreciation reported on Form 1125-A and elsewhere on return	16 b		16c	198,921.
	17	Depletion **(Do not deduct oil and gas depletion.)**			17	
	18	Retirement plans, etc.			18	
	19	Employee benefit programs			19	
	20	Other deductions (attach statement) * STMT			20	1,193,246.
	21	**Total deductions.** Add the amounts shown in the far right column for lines 9 through 20			21	3,025,682.
	22	**Ordinary business income (loss).** Subtract line 21 from line 8			22	232,218.

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than general partner or limited liability company member manager) is based on all information of which preparer has any knowledge.

► ____________________ Signature of general partner or limited liability company member manager ► ________ Date

May the IRS discuss this return with the preparer shown below (see instrs)? ☒ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
DAVE GOLDBERG		02/06/17		P01229759

Firm's name ► TAXES AND PAYROLL ACCOUNTANTS INC. Firm's EIN ► 45-2632150

Firm's address ► 10231 METRO PARKWAY STE 205, FORT MYERS FL 33966 Phone no. (239) 245-8470

Schedule B Other Information

		Yes	No
1	What type of entity is filing this return? Check the applicable box: a [X] Domestic general partnership b [ ] Domestic limited partnership c [ ] Domestic limited liability company d [ ] Domestic limited liability partnership e [ ] Foreign partnership f [ ] Other ►		
2	At any time during the tax year, was any partner in the partnership a disregarded entity, a partnership (including an entity treated as a partnership), a trust, an S corporation, an estate (other than an estate of a deceased partner), or a nominee or similar person?		X
3	At the end of the tax year: a Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization, or any foreign government own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If 'Yes,' attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership		X
	b Did any individual or estate own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If 'Yes,' attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership	X	
4	At the end of the tax year, did the partnership: a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If 'Yes,' complete (i) through (iv) below		X

(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage Owned in Voting Stock

	Yes	No
b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If 'Yes,' complete (i) through (v) below		X

(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital

		Yes	No
5	Did the partnership file Form 8893, Election of Partnership Level Tax Treatment, or an election statement under section 6231(a)(1)(B)(ii) for partnership-level tax treatment, that is in effect for this tax year? See Form 8893 for more details		X
6	Does the partnership satisfy **all four** of the following conditions? a The partnership's total receipts for the tax year were less than $250,000. b The partnership's total assets at the end of the tax year were less than $1 million. c Schedules K-1 are filed with the return and furnished to the partners on or before the due date (including extensions) for the partnership return. d The partnership is not filing and is not required to file Schedule M-3		X
	If 'Yes,' the partnership is not required to complete Schedules L, M-1, and M-2; Item F on page 1 of Form 1065; or Item L on Schedule K-1.		
7	Is this partnership a publicly traded partnership as defined in section 469(k)(2)?		X
8	During the tax year, did the partnership have any debt that was cancelled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt?		X
9	Has this partnership filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide information on any reportable transaction?		X
10	At any time during calendar year 2015, did the partnership have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If 'Yes,' enter the name of the foreign country. ►		X

Schedule B Other Information *(continued)*

		Yes	No
11	At any time during the tax year, did the partnership receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If 'Yes,' the partnership may have to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts. See instructions		X
12a	Is the partnership making, or had it previously made (and not revoked), a section 754 election?		X
	See instructions for details regarding a section 754 election.		
b	Did the partnership make for this tax year an optional basis adjustment under section 743(b) or 734(b)? If 'Yes,' attach a statement showing the computation and allocation of the basis adjustment. See instructions		X
c	Is the partnership required to adjust the basis of partnership assets under section 743(b) or 734(b) because of a substantial built-in loss (as defined under section 743(d)) or substantial basis reduction (as defined under section 734(d))? If 'Yes,' attach a statement showing the computation and allocation of the basis adjustment. See instrs		X
13	Check this box if, during the current or prior tax year, the partnership distributed any property received in a like-kind exchange or contributed such property to another entity (other than disregarded entities wholly owned by the partnership throughout the tax year) ► ☐		
14	At any time during the tax year, did the partnership distribute to any partner a tenancy-in-common or other undivided interest in partnership property?		X
15	If the partnership is required to file Form 8858, Information Return of U.S. Persons With Respect To Foreign Disregarded Entities, enter the number of Forms 8858 attached. See instructions ►		
16	Does the partnership have any foreign partners? If 'Yes,' enter the number of Forms 8805, Foreign Partner's Information Statement of Section 1446 Withholding Tax, filed for this partnership. ►		X
17	Enter the number of Forms 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships, attached to this return. ►		
18a	Did you make any payments in 2015 that would require you to file Form(s) 1099? See instructions		X
b	If 'Yes,' did you or will you file required Form(s) 1099?		
19	Enter the number of Form(s) 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations, attached to this return. ►		
20	Enter the number of partners that are foreign governments under section 892. ►		

Designation of Tax Matters Partner (see instructions)

Enter below the general partner or member-manager designated as the tax matters partner (TMP) for the tax year of this return:

Name of designated TMP	► CONNIE ADAMSON	Identifying number of TMP	► [redacted]
If the TMP is an entity, name of TMP representative	►	Phone number of TMP	►
Address of designated TMP	► 5805 CHIQUITA BLVD S CAPE CORAL, FL 33914		

Form **1065** (2015) ALLIED PORTABLES LLC 26-4556128 Page **4**

Schedule K Partners' Distributive Share Items

				Total amount
Income (Loss)	1	Ordinary business income (loss) (page 1, line 22)	1	232,218.
	2	Net rental real estate income (loss) (attach Form 8825)	2	
	3 a	Other gross rental income (loss) — 3a		
	b	Expenses from other rental activities (attach stmt) — 3b		
	c	Other net rental income (loss). Subtract line 3b from line 3a	3 c	
	4	Guaranteed payments	4	4,000.
	5	Interest income	5	
	6	Dividends: a Ordinary dividends	6 a	
		b Qualified dividends — 6b		
	7	Royalties	7	
	8	Net short-term capital gain (loss) (attach Schedule D (Form 1065))	8	
	9 a	Net long-term capital gain (loss) (attach Schedule D (Form 1065))	9 a	
	b	Collectibles (28%) gain (loss) — 9b		
	c	Unrecaptured section 1250 gain (attach statement) — 9c		
	10	Net section 1231 gain (loss) (attach Form 4797)	10	
	11	Other income (loss) (see instructions) Type ►	11	
Deductions	12	Section 179 deduction (attach Form 4562)	12	
	13 a	Contributions	13 a	
	b	Investment interest expense	13 b	
	c	Section 59(e)(2) expenditures: (1) Type ► (2) Amount ►	13 c (2)	
	d	Other deductions (see instructions) Type ►	13 d	
Self-Employment	14 a	Net earnings (loss) from self-employment	14 a	236,218.
	b	Gross farming or fishing income	14 b	
	c	Gross nonfarm income	14 c	3,257,900.
Credits	15 a	Low-income housing credit (section 42(j)(5))	15 a	
	b	Low-income housing credit (other)	15 b	
	c	Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	15 c	
	d	Other rental real estate credits (see instructions) Type ►	15 d	
	e	Other rental credits (see instructions) Type ►	15 e	
	f	Other credits (see instructions) Type ►	15 f	
Foreign Transactions	16 a	Name of country or U.S. possession ►		
	b	Gross income from all sources	16 b	
	c	Gross income sourced at partner level	16 c	
		Foreign gross income sourced at partnership level		
	d	Passive category ► e General category ► f Other ►	16 f	
		Deductions allocated and apportioned at partner level		
	g	Interest expense ► h Other ►	16 h	
		Deductions allocated and apportioned at partnership level to foreign source income		
	i	Passive category ► j General category ► k Other ►	16 k	
	l	Total foreign taxes (check one): ► Paid ☐ Accrued ☐	16 l	
	m	Reduction in taxes available for credit (attach statement)	16 m	
	n	Other foreign tax information (attach statement)		
Alternative Minimum Tax (AMT) Items	17 a	Post-1986 depreciation adjustment	17 a	-456.
	b	Adjusted gain or loss	17 b	
	c	Depletion (other than oil and gas)	17 c	
	d	Oil, gas, and geothermal properties — gross income	17 d	
	e	Oil, gas, and geothermal properties — deductions	17 e	
	f	Other AMT items (attach stmt)	17 f	
Other Information	18 a	Tax-exempt interest income	18 a	
	b	Other tax-exempt income	18 b	
	c	Nondeductible expenses	18 c	316.
	19 a	Distributions of cash and marketable securities	19 a	
	b	Distributions of other property	19 b	
	20 a	Investment income	20 a	
	b	Investment expenses	20 b	
	c	Other items and amounts (attach stmt)		

BAA Form **1065** (2015)

Analysis of Net Income (Loss)

1	Net income (loss). Combine Schedule K, lines 1 through 11. From the result, subtract the sum of Schedule K, lines 12 through 13d, and 16l	1	236,218.

2 Analysis by partner type:	(i) Corporate	(ii) Individual (active)	(iii) Individual (passive)	(iv) Partnership	(v) Exempt Organization	(vi) Nominee/Other
a General partners		236,218.				
b Limited partners						

Schedule L Balance Sheets per Books

Assets	Beginning of tax year (a)	(b)	End of tax year (c)	(d)
1 Cash		207,171.		42,511.
2a Trade notes and accounts receivable	282,321.		399,967.	
b Less allowance for bad debts		282,321.		399,967.
3 Inventories				
4 U.S. government obligations				
5 Tax-exempt securities				
6 Other current assets (attach stmt)				
7a Loans to partners (or persons related to partners)				
b Mortgage and real estate loans				
8 Other investments (attach stmt)				
9a Buildings and other depreciable assets	2,032,660.		2,032,660.	
b Less accumulated depreciation	964,527.	1,068,133.	1,163,448.	869,212.
10a Depletable assets				
b Less accumulated depletion				
11 Land (net of any amortization)				
12a Intangible assets (amortizable only)	2,750.		2,750.	
b Less accumulated amortization	168.	2,582.	351.	2,399.
13 Other assets (attach stmt) Ln 13 Stmt		18,239.		70,595.
14 Total assets		1,578,446.		1,384,684.
Liabilities and Capital				
15 Accounts payable		75,180.		
16 Mortgages, notes, bonds payable in less than 1 year				
17 Other current liabilities (attach stmt) Ln 17 Stmt		11,586.		60,130.
18 All nonrecourse loans				
19a Loans from partners (or persons related to partners)		1,031,323.		1,166,142.
b Mortgages, notes, bonds payable in 1 year or more		331,538.		137,563.
20 Other liabilities (attach stmt) Ln 20 Stmt		19,137.		14,989.
21 Partners' capital accounts		109,682.		5,860.
22 Total liabilities and capital		1,578,446.		1,384,684.

Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return

Note. The partnership may be required to file Schedule M-3 (see instructions).

1 Net income (loss) per books	231,902.	6 Income recorded on books this year not included on Schedule K, lines 1 through 11 (itemize):	
2 Income included on Schedule K, lines 1, 2, 3c, 5, 6a, 7, 8, 9a, 10, and 11, not recorded on books this year (itemize):		a Tax-exempt interest $	
3 Guaranteed pmts (other than health insurance)	4,000.	7 Deductions included on Schedule K, lines 1 through 13d, and 16l, not charged against book income this year (itemize):	
4 Expenses recorded on books this year not included on Schedule K, lines 1 through 13d, and 16l (itemize):		a Depreciation $	
a Depreciation $			
b Travel and entertainment $ 316.	316.	8 Add lines 6 and 7	
5 Add lines 1 through 4	236,218.	9 Income (loss) (Analysis of Net Income (Loss), line 1). Subtract line 8 from line 5	236,218.

Schedule M-2 Analysis of Partners' Capital Accounts

1 Balance at beginning of year	109,682.	6 Distributions: a Cash	
2 Capital contributed: a Cash		b Property	
b Property		7 Other decreases (itemize):	
3 Net income (loss) per books	231,902.	* STMT	335,724.
4 Other increases (itemize):		8 Add lines 6 and 7	335,724.
5 Add lines 1 through 4	341,584.	9 Balance at end of year. Subtract line 8 from line 5	5,860.

Form **1125-A**
(Rev December 2012)
Department of the Treasury
Internal Revenue Service

Cost of Goods Sold

► Attach to Form 1120, 1120-C, 1120-F, 1120S, 1065, or 1065-B.
► Information about Form 1125-A and its instructions is at *www.irs.gov/form1125a*.

OMB No. 1545-2225

Name	Employer identification number
ALLIED PORTABLES LLC	26-4556128

1	Inventory at beginning of year	1	
2	Purchases	2	251,247.
3	Cost of labor	3	
4	Additional section 263A costs (attach schedule)	4	
5	Other costs (attach schedule) * STMT	5	136,053.
6	**Total.** Add lines 1 through 5	6	387,300.
7	Inventory at end of year	7	
8	**Cost of goods sold.** Subtract line 7 from line 6. Enter here and on Form 1120, page 1, line 2 or the appropriate line of your tax return (see instructions)	8	387,300.

9 a Check all methods used for valuing closing inventory:
- (i) ☐ Cost
- (ii) ☐ Lower of cost or market
- (iii) ☐ Other (Specify method used and attach explanation) ► ____

b Check if there was a writedown of subnormal goods ► ☐

c Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970) ► ☐

d If the LIFO inventory method was used for this tax year, enter amount of closing inventory computed under LIFO | 9d |

e If property is produced or acquired for resale, do the rules of section 263A apply to the entity (see instructions)? ☐ Yes ☐ No

f Was there any change in determining quantities, cost, or valuations between opening and closing inventory? If 'Yes,' attach explanation ☐ Yes ☐ No

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property)

► Attach to your tax return.

► Information about Form 4562 and its separate instructions is at *www.irs.gov/form4562*.

OMB No. 1545-0172

2015

Attachment Sequence No. **179**

Name(s) shown on return: ALLIED PORTABLES LLC

Identifying number: 26-4556128

Business or activity to which this form relates: Form 1065 Line 22

Part I Election To Expense Certain Property Under Section 179

Note: *If you have any listed property, complete Part V before you complete Part I.*

1	Maximum amount (see instructions)	1	500,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost

7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the **smaller** of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2014 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2016. Add lines 9 and 10, less line 12 ►	13	

Note: *Do not use Part II or Part III below for listed property. Instead, use Part V.*

Part II Special Depreciation Allowance and Other Depreciation (**Do not** include listed property.) (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (**Do not** include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2015	17	192,621.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ► ☐		

Section B – Assets Placed in Service During 2015 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only — see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19 a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
			27.5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C – Assets Placed in Service During 2015 Tax Year Using the Alternative Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
20 a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	6,300.
22	**Total.** Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations — see instructions	22	198,921.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Form **4562** (2015) ALLIED PORTABLES LLC 26-4556128 Page **2**

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, certain computers, and property used for entertainment, recreation, or amusement.)

Note: *For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete* **only** *24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.*

Section A – Depreciation and Other Information (Caution: *See the instructions for limits for passenger automobiles.*)

24 a Do you have evidence to support the business/investment use claimed? [X] Yes [ ] No 24b If 'Yes,' is the evidence written? [X] Yes [ ] No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)						25		
26 Property used more than 50% in a qualified business use:								
TRUCKS	06/30/12	100.00	63,150.	0.	5.00	200 DB-HY	0.	
TRUCK 20	04/24/13	100.00	20,082.	20,082.	5.00	200 DB-HY	3,250.	
* STMT							3,050.	
27 Property used 50% or less in a qualified business use:								

28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 . . . . 28 6,300.

29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 29

Section B – Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other 'more than 5% owner,' or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
30 Total business/investment miles driven during the year (**do not** include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C – Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons (see instructions).

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.)		

Note: *If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles.*

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2015 tax year (see instructions):					
43 Amortization of costs that began before your 2015 tax year				43	183.
44 **Total.** Add amounts in column (f). See the instructions for where to report				44	183.

Form **8879-PE**

Department of the Treasury
Internal Revenue Service

IRS e-file Signature Authorization for Form 1065

► **Do not send to the IRS. Keep for your records.**

► **Information about Form 8879-PE and its instructions is at *www.irs.gov/form8879pe*.**

For calendar year 2015, or tax year beginning , 2015, and ending ,

OMB No. 1545-0123

2015

Name of partnership: ALLIED PORTABLES LLC

Employer identification number: 26-4556128

Part I Return Information (Whole dollars only)

1	Gross receipts or sales less returns and allowances (Form 1065, line 1c)	1	3,645,200.
2	Gross profit (Form 1065, line 3)	2	3,257,900.
3	Ordinary business income (loss) (Form 1065, line 22)	3	232,218.
4	Net rental real estate income (loss) (Form 1065, Schedule K, line 2)	4	
5	Other net rental income (loss) (Form 1065, Schedule K, line 3c)	5	

Part II Declaration and Signature Authorization of General Partner or Limited Liability Company Member Manager (Be sure to get a copy of the partnership's return)

Under penalties of perjury, I declare that I am a general partner or limited liability company member manager of the above partnership and that I have examined a copy of the partnership's 2015 electronic return of partnership income and accompanying schedules and statements and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts shown on the copy of the partnership's electronic return of partnership income. I consent to allow my electronic return originator (ERO), transmitter, or intermediate service provider to send the partnership's return to the IRS and to receive from the IRS **(a)** an acknowledgment of receipt or reason for rejection of the transmission and **(b)** the reason for any delay in processing the return. I have selected a personal identification number (PIN) as my signature for the partnership's electronic return of partnership income.

General Partner or Limited Liability Company Member Manager's PIN: check one box only

☐ I authorize ______________ (ERO firm name) to enter my PIN ______________ (do not enter all zeros) as my signature on the partnership's 2015 electronically filed return of partnership income.

☒ As a general partner or limited liability company member manager of the partnership, I will enter my PIN as my signature on the partnership's 2015 electronically filed return of partnership income.

General partner or limited liability company member manager's signature ► ______________

Title ► LLC MEMBER Date ► ______________

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 60574212110 (do not enter all zeros)

I certify that the above numeric entry is my PIN, which is my signature on the 2015 electronically filed return of partnership income for the partnership indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub 3112,** IRS *e-file* Application and Participation, and **Pub 4163,** Modernized e-File (MeF) Information for Authorized IRS *e-file* Providers for Business Returns.

ERO's signature ► ______________ Date ► 02/06/2017

ERO Must Retain This Form — See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So